

**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**☒

Declaration Submitted with Initial Filing

☐

Declaration Submitted after Initial Filing

Attorney Docket Number

X-16324

First Named Inventor

Ronald Bradley Demattos

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ANTI-AB ANTIBODY

the specification of which

☐ is attached hereto

OR

☒was filed on
(MM/DD/YYYY)

02/17/2005

as United States Application Number or PCT International

Application
Number

PCT/US2005/005198

and was amended on
(MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional applications(s) listed below.

Application Number(s)

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60/546,764

02/23/2004

☐Additional provisional application
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priority sheet attached hereto.

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Robert A. Armilage	27,417
Brian P. Barrett	39,597
Michael T. Bates	34,121
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Alexander Wilson	45,782
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MaryAnn Wiskerchen	45,511
Dan L. Wood	48,613

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	ELI LILLY AND COMPANY				
Address	ATTN: Thomas LaGrandeur				
Address	Patent Division, P.O. Box 6288				
City	INDIANAPOLIS	State	INDIANA	ZIP	46206-6288
Country	US	Telephone	(317) 651-1527	Fax	(317) 276-3881

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Name of Sole or First Inventor: ☐ A Petition has been filed for this unsigned inventor

Given Name	Ronald	Middle Name	Bradley	Family Name	Demattos	Suffix e.g. Jr.
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Inventor's Signature		Date	
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Residence: City	Noblesville	State	IN	Country	US	Citizenship	US
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Address	10474 Ringtail Place
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Post Office Address	SAME AS ABOVE
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**DECLARATION**

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Uma		Middle Name		Family Name	Kuchibhotla	Suffix e.g. Jr.
Inventor's Signature						Date	
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	IN
Address	12604 Bent Oak Lane						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46236	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Hsiu-Chiung		Middle Name		Family Name	Yang	Suffix e.g. Jr.
Inventor's Signature						Date	2-17-2005
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	US
Address	673 East Merrill Street						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46203	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Don		Middle Name	B.	Family Name	McClure	Suffix e.g. Jr.
Inventor's Signature						Date	02/16/2005
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	US
Address	7816 Mallard Way						
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Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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☐ A Petition has been filed for this unsigned inventor

Given Name	Ronald	Middle Name	Bradley	Family Name	Demattos	Suffix e.g. Jr.	
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Inventor's Signature  Date 5/31/95

Residence: City	Noblesville	State	IN	Country	US	Citizenship	US
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Post Office Address	SAME AS ABOVE						
City	Noblesville	State	IN	Zip	46060	Country	US

☒ Additional Inventors are being named on supplement sheet(s) attached hereto.

Please type a plus sign (+) inside this box



PTO/SB/01 (8-96) (MODIFIED)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION

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CERTIFICATE UNDER 37 CFR 3.73(b)

Applicant: Ronald Bradley DeMattos, et al.

Application No.: US Nat'l Phase of PCT/US2005/005198 Filed: 17 February 2005 (17.02.2005)

Entitled: ANTI-ABETA ANTIBODY

ELI LILLY AND COMPANY

(Name of Assignee)

, a CORPORATION

(Type of Assignee, e.g. corporation, partnership, university, government agency, etc.)

certifies that it is the assignee of the entire right, title and interest in the patent application identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application identified above.

☐ The assignment was recorded in the Patent and Trademark Office at Reel _____, Frame.

☒ The assignment is being submitted separately for recordation; a copy of this assignment is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

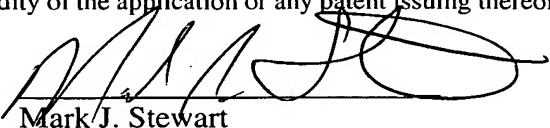
☐ Copies of assignments or other documents in the chain of title are attached.

The undersigned (whose title is supplied below) is empowered to sign this certificate on behalf of the assignee.

I hereby declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further, that these statements are made with the knowledge that willful false statements, and the like so made, are punishable by fine or imprisonment, or both, under Section 1001, Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

23 August 2006

Date


Mark J. Stewart
Patent Counsel

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:

☒ Practitioners associated with the Customer Number:

25885

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Assignee Name and Address:

Eli Lilly and Company
Patent Division
PO Box 6288
Indianapolis, Indiana 46206-6288

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Douglas K. Norman	Date	10 August 2004
Signature	<i>Douglas K. Norman</i>	Telephone	317-433-1651
Title	Deputy General Counsel, General Patent Counsel		

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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☒ Additional inventors are being named on supplement sheet(s) attached hereto.

**DECLARATION**

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Uma	Middle Name		Family Name	Kuchibhotla	Suffix e.g. Jr.	
Inventor's Signature	<i>Uma</i>				Date	Mar 28 '05	
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	IN
Address	12604 Bent Oak Lane						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46236	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Hsiu-Chiung	Middle Name		Family Name	Yang	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	US
Address	673 East Merrill Street						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46203	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Don	Middle Name	B.	Family Name	McClure	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	US
Address	7816 Mallard Way						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46256	Country	US